APPLICATION AS FILED - PART I										Application or Dockel Humber				
٠ ـ ٠	APPLI	cation as	FILED -	- PART I							2/8-1	<u> </u>		
		(Column	1)	(Column 2)				P			0	THER	THAN	
FOR		. NUMBER FRED				SMALL ENTITY			, 	OR ·	OTHER THAN BMALL ENTITY			
CFEE	<del> </del> -	. · HVMBER	RED	NUMBER EXTR	u l	RATE	= (1)							
R 1.16(e). (b), c	M (c))	<u></u>				1	-141	FEE	<u> </u>		RATE	3)	FEE	<b>(1)</b>
ICH FEE RI 1.10(k), 6), or		•		<del></del>				<u> </u>	. 1		•	•		141
NATION FE	Part)	<u> </u>		<u>.</u>	ı				$\neg$	·	<del></del>			
1.16(0). (0). 0	(6))		. 7			<b> </b>			i	- 1	· ·,			
. OLAIMS		· · ·				L	ı		- 1	ſ			·	<u> </u>
3 1.16(1))		min	ue 20 e	. ' 1	- 1					- 1				
ENDENT GL	ums   ··	**** *** ***			-1.	×	ك		_	R	χ	_		_
			us 8 •		- 1	×	1		- 1°	- F				
ATION SIZE	1	nto specifical	ion and d	rawings exceed to	70	<del></del>			_	L	K	e [	· · · · ·	••
	ls	\$250 (\$125 (	or amolia	logilou size lee di	19	1	- 1		- 1	- [		_		
1.16(e))	ad	dillonal 50 sh	BBG or fo	olion thereof. Se	. 1		- 1		ŀ			- 1		
<del></del>	. 35	U.S.O. 41(a)	(1)(0) an	1 37 OFR 1.18(8).	•		- 1		- !	- 1	•	·		
E DEPENDE	NT OLAU	A PRESENT (8				·				1.		- 1	•	
							- 1		7	-		- -		_
ierence in co	lumn 1 ts	less than zero,	enier "O" to	antisma a				-	-1	· Ŀ	• •			
						TOTAL			1					-
APPLI	CATION	AS AMÈNO	DEO - P	ARTI			-		<b>-</b>		TOTAL	بننان		
		•. •												
	(Column	1)	(Oolu	nn 2) (Column 3							· ·			- 1
- 1	OLAIM REMAIN	9	HIOH	61	<u>'</u>	SMAL	L ENT	TY	OR		SHTO LIAMB	R: TH	an .	ı
1.	AFTER		PREVIO	ER PRESENT	11	RATE (#)	.1	4001	7.	_		ENT	11	4
olei A	MENDME	M.E.	PAID	OR EXTRA	11	10115 (4)		addi- Konal		A	ATE (\$)		ADDI-	-
1.1(0)	- / 4	Minus.	" 35		-1 F		J_F	EE (\$)	] .	i i	•		IONAL .	Ī
ndent		Minus	*** 8	<del>-1-2</del>	J L	(85 .z	1 2		'		- 4	<del> </del>	EE (9)	1
		I I	_` ク	· 1.5. (c. )	$1 \cdot \Gamma$	44.0	1		OR	بذا	50 =		<u>z · · · </u>	
allon size fe	0 (37 OFF	1.16(4))		· · · · · · · · · · · · · · · · · · ·	1 14	100 -	4		ĐR	xal	50 E	1	<u></u>	7
RESENTATIO	N OF MUR	TPI E DEDELINE		(87 OFR 1.180)	<del>∦</del> ؞ ├╤	* esta   1 to	<u> </u>	)				-	<del>/ ···</del>	1
		· CC DEFERROE	M OCAIM	(87 OFR 1.180) -	11/	180 ``		7	in,	2/	0	-	SERVICES	ł.,
	٠.				•	TAL	<del> /</del>		OR			• •		ľ
	•				, Át	D'L FEE	<b>\</b>	<u> </u>	OR	TOTA	LFEE			ľ
	olumn 1)		(Oofurni	(Column 3)	•		٠;			AUD	ruce (	<u> </u>		ŀ
RE	CLAIMS . MAINING	$\perp$	HIGHES		-							٠.		١.
1/0/11 /	AFTER	1 1.	NUMBER REVIOUS	PRESENT LY EXTRA	R	ATE (6)	'AD	Ďŀ-	- 1					
AME	HDMEN!		PAID FO		.		TIO!	HAL .	- 1	KA	FE (\$)	AD	DI.	
<b>4(1)</b>	7	Minus	' 25.	=77)	<b> </b>		-FGE	(8)	Į.			FEE	/(8)	
(N)	7	Minus "	<del></del>	1. 4/	×	<u> -                                   </u>	x /:		OR		• •	7	1	
n Size Fee (	<u></u>		<u>-3:</u>		·x/		$\lambda$		~ t			-/		٠.
			$\sim$		: <del>  ``</del>	<del></del> /	+		OR L	<u> </u>		1	- 1	
SENTATION C	OF MULTIP	LE DEPENDENT	CLAIM ON	CED 44000	<b>I</b>	<del>/</del> -	<del>}-</del>		. L	1		Z		
			(0)	ST 15 15 10 U)].	L	_/	'	\ \ \ \ \ .	OR	\ _	V			_
•	•	•	•		LOI	7		$\leftarrow$	. <b>-</b>	<del>-/</del> -			I·	
la column 4	holaes#			•	ADD	L FEE	·	: 10		OTAL		•	- 1	
esi Number	e was the	in the shiry in o	okimn 2, v	rile *0* in column 8.			·-		A	DD'L I	FE,		- 4	
004 bleshik 6	>		THE OF AL	C 15 (886 (hen 90				•	•		<del></del>			
ti Niimber Pr	autaunt. t	1-1-1-1-1		- 13 1988 (NBN S. anla	, 200		•	-	•		٠			
normalion is	required	by 37 CFR 1.1	6. The Inf	ident) is the highest- ormation is required 5.U.S.C. 122 and 37 ation form to the tree	MUNDEL	lound in the	sppro	odele bo	x tri cotu	mn 1.			1	
ahbiicq ()	~.i.~~oulk	ontiality, is gove	emed by. 3	5.U.S.C. 122 and 27	CED 4	n or telsin	e bene	fil by th	e public	which	la la Dia (	and 6.		

The transplant submitting the completed application form to the USPTO. The will vary depending upon the Individual case. Any complete complete the submitted of complete the s

If you need assistance in completing the form, call 1-800-PTO-9199 and select option ?.